I am a volunteer for Western North Carolina Aids Project (WNCAP). I moved to Asheville in 2013 and scheduled my first medical appointment at Western North Carolina Community Health Services, read the information for Medicare and noted that I could request a test for HIV, but I would have to ask for it—it could not be offered by medical staff. A week later, I was called to return for a consultation and told that I was HIV+ and then referred to WNCAP for counseling services and assistance.

There is more awareness now, but I'm sure this has happened to others. I met someone who suffered through 10 years of life-threatening crises before she asked for the HIV test and found out she was HIV+.

The lack of information puts everyone at risk because heterosexual individuals are unaware and/or misinformed of the dangers of unprotected sexual activity and do not realize that they are also at risk. I have difficulty discussing HIV with friends because I don't know what their perceptions are or what they have/have not been told. Education is seriously needed for everyone, and HIV testing should automatically be included in everyone's annual medical checkup.

WNCAP serves 18 counties in WNC, where there are not adequate treatment facilities or transportation to care; therefore, we need to see consideration for access and transportation statewide for low income individuals when the new Provider networks are established.

Buncombe County alone could lose not only jobs but access to health care for low income individuals unless Medicaid expansion is implemented.

While I appreciate the state not rushing to transition into it's proposed model, I humbly request that consumer voices be included in the discussion before any final decisions are made.

I am receiving Social Security, but even with disability, I did not qualify for Medicaid when I applied for Food Stamps in 2009 after a stroke because of a financial discrepancy. Without the aid of these 2 agencies, I would not be able to survive on Social Security and Medicare, as my medications are in excess of \$2300 a month.

The alternative is destitution, homelessness and in many cases premature death for low income individuals.